Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is amended filing

#### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Rosecarol First name  Nina Middle name  Lundy Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	FKA Rosecarol Acquaviva	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3239	

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Debtor 1 Rosecarol Nina Lundy

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	10160 SE 69th Ave	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Marion County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Deb	otor 1 Rosecarol Nina Lu	ındy			Case number (if known)	
Par	t 2: Tell the Court About	Your Bankruptcy C	ase			
7.	The chapter of the Bankruptcy Code you are			of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for E	Bankruptcy
	choosing to file under	Chapter 7				
		☐ Chapter 11				
		☐ Chapter 12				
		☐ Chapter 13				
8.	How you will pay the fee	about how y	ou may pay. Typion r attorney is subm	cally, if you are paying the fee yo	k with the clerk's office in your local court for urself, you may pay with cash, cashier's che alf, your attorney may pay with a credit card	ck, or money
				<b>allments.</b> If you choose this option (Official Form 103A).	n, sign and attach the Application for Individ	luals to Pay
		•		'	n only if you are filing for Chapter 7. By law,	a judge may,
		but is not re	quired to, waive yo	our fee, and may do so only if yo	ur income is less than 150% of the official po installments). If you choose this option, you	overty line that
					ial Form 103B) and file it with your petition.	i mast mi out
9.	Have you filed for	■ No.				
	bankruptcy within the last 8 years?	☐ Yes.				
	•	District		When	Case number	
		District		When		
		District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		Debtor			Relationship to you	
		District		When	Case number, if known	
		Debtor			Relationship to you	
		District		When	Case number, if known	
11.	Do you rent your residence?	■ No. Go to	line 12.			
		☐ Yes. Has y	our landlord obtai	ned an eviction judgment agains	t you?	
			No. Go to line 1	2.		
			Yes. Fill out <i>Init</i> this bankruptcy		Judgment Against You (Form 101A) and file	it as part of

# 

Deb	otor 1 Rosecarol Nina Lu	undy			Case number (if known)
Par	Report About Any Bu	sinesses	You Owr	າ as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a		Numb	per, Street, City, Stat	te & ZIP Code
	separate sheet and attach it to this petition.		Choo	k the appropriate he	ox to describe your business:
	it to this polition.				ness (as defined in 11 U.S.C. § 101(27A))
					Estate (as defined in 11 U.S.C. § 101(51B))
				•	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation in 11 U.S	s. If you in ns, cash-f S.C. 1116	ndicate that you are low statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	■ No.		filing under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
	-				Number, Street, City, State & Zip Code

Debtor 1 Rosecarol Nina Lundy

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Rosecarol Nina L	undy			Case number	(if known)
Par	t 6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily	y consumer debts? Consur personal, family, or househol		ed in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.		y business debts? Businessinvestment or through the op		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts yo	ou owe that are not consume	r debts or business	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chap	oter 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.		7. Do you estimate that after available to distribute to uns		erty is excluded and administrative expenses
	administrative expenses are paid that funds will		□ No			
	be available for distribution to unsecured creditors?		■ Yes			
18.	How many Creditors do you estimate that you	■ 1-49 □ 50-99		□ 1,000-5,000 □ 5001-10,000		□ 25,001-50,000 □ 50,001-100,000
	owe?	☐ 50-99 ☐ 100-1	99	☐ 10,001-25,000	ı	☐ More than100,000
		□ 200-9	99			
19.	How much do you	□ \$0 - \$	50 000	□ \$1,000,001 - \$	10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 -		☐ \$1,000,000,001 - \$10 billion
	be worth:	. ,	001 - \$500,000	□ \$50,000,001 -		☐ \$10,000,000,001 - \$50 billion
		<b>□</b> \$500,	001 - \$1 million	\$100,000,001	- \$500 million	☐ More than \$50 billion
20.	How much do you	□ \$0 - \$		□ \$1,000,001 - \$	10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - □ \$50,000,001 -		□ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - □ \$100,000,001 -		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		<b>ω</b> φοσο,	501		•	·
Par	t 7: Sign Below					
For	you	I have ex	amined this petition, and I	declare under penalty of per	jury that the inform	nation provided is true and correct.
						under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.
				did not pay or agree to pay so d the notice required by 11 U		an attorney to help me fill out this
		I request	relief in accordance with the	ne chapter of title 11, United	States Code, spec	ified in this petition.
		bankrupt and 3571	cy case can result in fines			r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Roseca	rol Nina Lundy e of Debtor 1	S	Signature of Debtor	2
		Executed	on November 26, 20	1 <b>9</b> E	executed on	
			MM / DD / YYYY		MM /	/ DD / YYYY

	Case 3:19-bk-04522-JAF	Filed 11/26/19	Page 7 of 62
Debtor 1 Rosecarol Nina	Lundy	Case	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	y and, in a case in which § 707(b)(4)(D) applies, co		, , , , , , , , , , , , , , , , , , , ,
	/s/ Kenneth M. Hesser	Date	November 26, 2019
	Signature of Attorney for Debtor		MM / DD / YYYY
	Kenneth M. Hesser 375720		
	Schatt, Hesser, McGraw		
	PO Box 4440		
	Ocala, FL 34478  Number, Street, City, State & ZIP Code		

Email address

Contact phone **352-789-6520** 

375720 FL Bar number & State

khesser@schatthesser.com

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Eill-	n this information to identify your case:		
Deb			
Dep	First Name Middle Name Last Name		
Deb	tor 2 se if, filing) First Name Middle Name Last Name		
` '	ed States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA		
Case (if kno	e numberwn)	☐ Chec	k if this is an
		amer	ded filing
	icial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information scomplete and accurate as possible. If two married people are filing together, both are equally responsible for		12/15
infor	mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend		
	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Part	1: Summarize Your Assets		
		Your a	ssets of what you own
1	Schedule A/B: Property (Official Form 106A/B)	value	or macyou om
1.	1a. Copy line 55, Total real estate, from Schedule A/B	\$	196,320.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	148,957.08
	1c. Copy line 63, Total of all property on Schedule A/B	\$	345,277.08
Part	2: Summarize Your Liabilities		
		Your I	abilities
			t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	314,775.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	59,052.00
	Your total liabilities	\$	373,827.00
Part	3: Summarize Your Income and Expenses		
	<u>'</u>		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,198.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,395.26
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
0.	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	■ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Rosecarol Nina Lundy

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,007.57

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

	Marion County					the debtors and anoth ou wish to add about on number:		(	structions)	ay p. oporty
					Debtor 2 only  Debtor 1 and D	ebtor 2 only			if this is com	nmunity property
				□ Who	has an interest in Debtor 1 only	in the property? Che	eck one	(such as fe		our ownership interes ancy by the entireties,
	City	State	ZIP Code		Investment pro	perty			96,320.00	\$196,320.
	Belleview	FL	34420-0000		Duplex or multi Condominium of Manufactured of Land	or cooperative			Who Have Clair	ns Secured by Property.  Current value of the portion you own?
1.1	10160 SE 69	th Ave	ription	What ■	Single-family ho					aims or exemptions. Put d claims on <i>Schedule D</i>
	No. Go to Part 2. Yes. Where is the	, .	uitable interest in a	ny resid	ence, building, l	land, or similar prop	oerty?			
hink nfori	it fits best. Be as mation. If more sp ver every question	s complete and a pace is needed, a n.	ccurate as possibl ttach a separate sh	e. If two neet to ti	married people his form. On the	are filing together, I	both are e al pages,	qually resp	onsible for su	the category where younglying correct and another (if known).
Sc	hedule	n 106A/B <b>A/B: Pr</b>								12/15
Cas	e number									☐ Check if this is amended filing
Unit	ed States Bankr	uptcy Court for	the: MIDDLE DI	STRICT	T OF FLORIDA	1				
(Spo	tor 2 use, if filing)	First Name	Middle	Name		Last Name				
Deb		Rosecarol Ni First Name		Name		Last Name				
				is tiling	j:					
Deb	ni uno miorina	ion to identify	your case and th	is filing	g:					

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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		Rosecarol N		Ca			
Cai	s, vans,	, trucks, trac	ctors, sport utility ve	ehicles, motorcycles			
۱ 🗆	10						
<b>\</b>	'es						
		_					
.1	Make:	Jeep		Who has an interest in the property? Check one			ims or exemptions. Put
	Model:	Grand C Overland		■ Debtor 1 only			I claims on Schedule D: as Secured by Property.
	Year:	2018		Debtor 2 only	Current value of		Current value of the
	Approxin	mate mileage:	9600	Debtor 1 and Debtor 2 only	entire property?	trie	portion you own?
	Other inf	formation:		$\square$ At least one of the debtors and another			
	1C4RK	KFCG1KV3	33999		\$40,727	7 00	\$40,727.0
				☐ Check if this is community property (see instructions)	Ψ+0,121		Ψ40,727.0
- '	'es						
				vn for all of your entries from Part 2, including a			¢40 727 00
				vn for all of your entries from Part 2, including a that number here			\$40,727.00
.pa	ges you	ı have attach	ned for Part 2. Write	that number here			\$40,727.00
rt 3	Descri	i have attach ibe Your Perso or have any	ned for Part 2. Write onal and Household It legal or equitable in	that number here		<b>p</b> D	urrent value of the ortion you own? o not deduct secured aims or exemptions.
.pa	Describu own ousehold amples:	i have attach ibe Your Perso or have any goods and	ned for Part 2. Write onal and Household It legal or equitable in	that number heretems stems sterest in any of the following items?		<b>p</b> D	urrent value of the ortion you own? o not deduct secured
pa t 3 yo	Describu own ousehold amples:	ibe Your Person or have any goods and Major applian	onal and Household Idlegal or equitable in furnishings nces, furniture, linens Office: 1 cornel lamps, 1 cart Spare Bedroon bookshelf, 1 sn Kitchen: 1 mixed 1 oven, small coundry Room Dinning Room: 16 crystal glass	that number here  tems  Interest in any of the following items?  In desk, 1 bookshelf, 1 office chair, 1 shredom:  In queen mattress, 1 white bedroom set, 2 and bookshelf, 1 wall clock, 1 small chest er, 1 small pressure cooker, 1 keurig, 1 toas abinet, small table, 4 chairs, 4 bar stools:  Washer/Dryer set  wood table, 6 chairs, 1 hutch, 12 setting Coses	der, 2  1 ster oven, china set,	<b>p</b> D	urrent value of the ortion you own? o not deduct secured
.pa	Describu own ousehold amples:	ibe Your Person or have any goods and Major applian	onal and Household It legal or equitable in furnishings nces, furniture, linens of the following furnishings nces, furniture, linens of the furnishing furnis	that number here  tems  Interest in any of the following items?  In desk, 1 bookshelf, 1 office chair, 1 shredom: 1 queen mattress, 1 white bedroom set, 2 nall bookshelf, 1 wall clock, 1 small chest er, 1 small pressure cooker, 1 keurig, 1 toas abinet, small table, 4 chairs, 4 bar stools: Washer/Dryer set wood table, 6 chairs, 1 hutch, 12 setting C	der, 2  1 ster oven, china set, abinet, 1 , 1 lamp, velry box, e, 1	<b>p</b> D	urrent value of the ortion you own? o not deduct secured

☐ No

Yes. Describe.....

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Debtor 1	Rosecarol N	ina Lundy	Case number (if known)	
		Desktop computer Copier ipad X-box Camera 1 DVD player Television Stereo Master Unit 6 inch speaker		\$400.00
Exampl ■ No		figurines; paintings, prints, or other artwork; books ons, memorabilia, collectibles	, pictures, or other art objects; stamp, coin, or	baseball card collections;
Exampl □ No	ent for sports ar les: Sports, photo musical instru Describe	graphic, exercise, and other hobby equipment; bic	ycles, pool tables, golf clubs, skis; canoes and	kayaks; carpentry tools;
		Stand on vibrator		\$65.00
■ No □ Yes.  11. Clothe Examp	oles: Pistols, rifles  Describe	s, shotguns, ammunition, and related equipment others, furs, leather coats, designer wear, shoes, ac	ccessories	
		Misc.		\$200.00
☐ No		welry, costume jewelry, engagement rings, wedding	g rings, heirloom jewelry, watches, gems, gold	, silver
		Costume Jewelry		\$100.00
Examp ■ No □ Yes.	orm animals coles: Dogs, cats, l Describe her personal and	oirds, horses d household items you did not already list, incl	uding any health aids you did not list	
Yes.	Give specific info	ormation		

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Debte	or 1	Roseca	rol Nina Lun	dy	Case number (if know	n)
			2 uprig 3 boar Kitche DVD's Misc. 2 ladd 4 X-bo	ok books ght vacuum cleaners d games en equiptment (pots a Holiday decorations ers ex games op Organ	nd pans)	\$567.00
					including any entries for pages you have attached	\$3,932.00
			Financial Asset any legal or e	s quitable interest in any c	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Exampl No			our wallet, in your home, in	n a safe deposit box, and on hand when you file your pe	tition
					Cash	\$25.00
	Exampl No		ing, savings, or tions. If you hav		certificates of deposit; shares in credit unions, brokerag the same institution, list each.  Institution name:  Ocala Community Credit Union xxxx4582	e houses, and other similar \$24,385.88
			17.2.	Medicare Set Aside Account	State Farm Bank xxxx1294	\$49,963.28
			17.3.	Savings	State Farm Bank xxxx8274	\$286.87
<b>E</b>	Exampl No		unds, investme	ly traded stocks ent accounts with brokerage	ge firms, money market accounts	
19. <b>N</b>		blicly trad			d and unincorporated businesses, including an inter	est in an LLC, partnership, and
		Give speci		about them	% of ownership:	
^ 	legotia lon-ne <sub>s</sub> No	able instrur gotiable in	<i>nent</i> s include p	ersonal checks, cashiers' those you cannot transfer	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	

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De	ebtor 1	Rosecarol	Nina Lundy		Ca	ase number (if known)	
			Issuer na	ıme:			
21.	Example. ■ No	s: Interests i		eogh, 401(k), 403(b), thrii	t savings accounts, or other per	nsion or profit-sharing plans	
	☐ Yes. Lis	st each acco	unt separately. Type of acc	ount: Ins	itution name:		
22.	Your sha	re of all unus			nay continue service or use fron ies (electric, gas, water), telecor		or others
	■ No □ Yes			Ins	itution name or individual:		
23.		(A contract	for a periodic pa	yment of money to you,	either for life or for a number of y	/ears)	
	■ No □ Yes		Issuer name and	description.			
24.	26 U.S.C.		tion IRA, in an a ), 529A(b), and 5		BLE program, or under a qual	ified state tuition program	1.
	■ No □ Yes		Institution name	and description. Separate	ely file the records of any interes	sts.11 U.S.C. § 521(c):	
25.	Trusts, e	quitable or f	future interests	in property (other than	anything listed in line 1), and	rights or powers exercisa	ble for your benefit
	☐ Yes. G	ive specific i	nformation abou	them			
26.				de secrets, and other in ebsites, proceeds from ro	tellectual property yalties and licensing agreement	S	
		ive specific i	nformation abou	them			
27.				eral intangibles licenses, cooperative as	sociation holdings, liquor license	es, professional licenses	
		ive specific i	nformation abou	them			
M	oney or pro	operty owed	d to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	_	nds owed to	you				
	■ No □ Yes. Gi	ve specific ir	nformation about	them, including whether	you already filed the returns and	I the tax years	
29.	Family su		or lump sum alim	ony, spousal support, ch	ld support, maintenance, divorc	e settlement, property settle	ement
	■ No □ Yes. Gi	ve specific ir	nformation				
30.	Example:	s: Unpaid wa		surance payments, disab made to someone else	ility benefits, sick pay, vacation	pay, workers' compensatio	on, Social Security
	■ No □ Yes. G	ive specific i	nformation				
31.		in insuranc s: Health, dis		urance; health savings a	ccount (HSA); credit, homeowne	er's, or renter's insurance	
	Yes. Na	ame the insu	rance company o Compan	of each policy and list its y name:	/alue. Beneficiary	<i>r</i> :	Surrender or refund value:

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Debtor 1 Rosecarol Nina Lundy		Case number (if known)		
		ntial: Whole Life. Net death t of \$17,659.39	Cynthia Fissell, Daughter	\$9,500.02
If you		you from someone who has died rust, expect proceeds from a life insura	ance policy, or are currently entitled to rec	eive property because
Yes	. Give specific information			
		Oxford Life Insurance Compa Husband, David R Lundy Policy #: OL00244696	ny: Pay out for Death of	\$20,137.03
Exam ■ No		er or not you have filed a lawsuit or isputes, insurance claims, or rights to s		
34. Other	contingent and unliquidated	claims of every nature, including co	ounterclaims of the debtor and rights to	set off claims
■ No				
⊔ Yes	. Describe each claim			
_ `	inancial assets you did not all	ready list		
■ No □ Yes	. Give specific information			
36. <b>Add</b>	the dollar value of all of your	entries from Part 4, including any e		\$104,298.08
Part 5: D	escribe Any Business-Related Pro	operty You Own or Have an Interest In. Li	ist any real estate in Part 1.	
37. <b>Do yo</b> u	own or have any legal or equitab	le interest in any business-related prope	rty?	
_	So to Part 6.			
☐ Yes.	Go to line 38.			
	escribe Any Farm- and Commerci you own or have an interest in farml	al Fishing-Related Property You Own or and, list it in Part 1.	Have an Interest In.	
46. <b>Do yo</b>	u own or have any legal or ec	uitable interest in any farm- or com	mercial fishing-related property?	
■ No	o. Go to Part 7.			
☐ Ye	ss. Go to line 47.			
Part 7:	Describe All Property You Ow	n or Have an Interest in That You Did Not	t List Above	
Exam	ou have other property of any apples: Season tickets, country cl			
■ No □ Yes	. Give specific information			
54. <b>Add</b>	the dollar value of all of your	entries from Part 7. Write that numb	per here	\$0.00

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Debtor 1	Rosecarol Nina Lundy		Case number (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. <b>Part</b>	1: Total real estate, line 2			\$196,320.00
56. Part 2	2: Total vehicles, line 5	\$40,727.00		
57. <b>Part</b> 3	3: Total personal and household items, line 15	\$3,932.00		
58. <b>Part</b> 4	4: Total financial assets, line 36	\$104,298.08		
59. <b>Part</b> 9	5: Total business-related property, line 45	\$0.00		
60. Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Part</b> 7	7: Total other property not listed, line 54	+\$0.00		
62. Total	personal property. Add lines 56 through 61	\$148,957.08	Copy personal property total	\$148,957.08
63. Total	of all property on Schedule A/B. Add line 55 + line 62			\$345,277.08

Ħ	ll in this inform	ation to identify your	case:				
	ebtor 1	Rosecarol Nina L					
		First Name	Middle Name	L	ast Name		
	ebtor 2 pouse if, filing)	First Name	Middle Name	L	ast Name		
Ur	nited States Bar	kruptcy Court for the:	MIDDLE DISTRICT OF FLO	RIDA			
C-	ase number						
	known)						Check if this is an amended filing
$\bigcirc$	fficial For	m 106C					
		-	onarty Val. Cla	ım	oc Evemnt		****
<u> </u>	chedule	e C: The Pro	operty You Cla	11111	i as exempt		4/19
the nee cas	property you list eded, fill out and se number (if kn	sted on <i>Schedule A/B: I</i> I attach to this page as own).	Property (Official Form 106A/B) many copies of Part 2: Addition	as yo nal Pa	ther, both are equally responsible for our source, list the property that you age as necessary. On the top of any	claim as ex additional p	tempt. If more space is bages, write your name and
spe any fun	ecific dollar am y applicable sta ids—may be ui	ount as exempt. Alter atutory limit. Some ex nlimited in dollar amo	natively, you may claim the femptions—such as those for unt. However, if you claim an	full fa r heal r exen	ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain k nption of 100% of fair market valu determined to exceed that amoun	eing exempt benefits, an ue under a l	ted up to the amount of d tax-exempt retirement aw that limits the
		statutory amount.	t and the value of the propert	.y .o c	acternation to exocour that amount	i, your exer	inplion would be infliced
Pa	rt 1: Identify	the Property You Cla	aim as Exempt				
1.	Which set of	exemptions are you c	laiming? Check one only, eve	n if yo	our spouse is filing with you.		
	You are cla	iming state and federal	nonbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	☐ You are cla	iming federal exemptio	ns. 11 U.S.C. § 522(b)(2)				
2.	For any prop	erty you list on Sched	lule A/B that you claim as exe	empt,	fill in the information below.		
		on of the property and lin	e on Current value of the portion you own	Am	ount of the exemption you claim	Specific la	ws that allow exemption
	Concuano 702 C	nat note tine property	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
		ember share: Ocala Credit Union xxxx4			\$1,000.00	Fla. Con	nst. art. X, § 4(a)(2)
	-	edule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
		ember share: Ocala			\$4,000.00	Fla. Stat	t. Ann. § 222.25(4)
		Credit Union xxxx4 edule A/B: 17.1	1582 ———		100% of fair market value, up to any applicable statutory limit		
		Whole Life. Net dea	th \$9,500.02		\$9,500.02	Fla. Stat	t. Ann. § 222.13
	benefit of \$7 Beneficiary:	। 7,659.39 : Cynthia Fissell,			100% of fair market value, up to		
	Daughter Colo				any applicable statutory limit		
	Line from Scri	edule A/B: <b>31.1</b>					
3.			mption of more than \$170,35 d every 3 years after that for ca		iled on or after the date of adjustme	nt.)	
	☐ Yes. Did	you acquire the proper	ty covered by the exemption wi	ithin 1	,215 days before you filed this case	?	
	☐ No						
	☐ Ye	s					

Official Form 106C

	Case 3.1	9-DK-04522-JAF DUCI FIIEC	111/20/19 Pag	je 18 01 62	
Fill in this in	formation to identify you	ır case:			
Debtor 1	Rosecarol Nina	Lundy Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
United States	Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA			
Case number (if known)	·				if this is an ded filing
	orm 106D le D: Creditors	Who Have Claims Secure	ed by Property	У	12/15
	y the Additional Page, fill it o	If two married people are filing together, both are eout, number the entries, and attach it to this form.			
•	tors have claims secured by	y your property?			
☐ No. Cl	neck this box and submit t	his form to the court with your other schedules.	You have nothing else to	o report on this form.	
Yes. F	ill in all of the information	below.			
	st All Secured Claims				
		more than one secured claim, list the creditor separate	Column A	Column B	Column C
for each claim.	If more than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Nation	Star/Mr. Cooper	Describe the property that secures the claim:	\$250,457.00	\$196,320.00	\$54,137.00
Creditor's  Attn: E	Name Bankruptcy	10160 SE 69th Ave Belleview, FL 34420 Marion County			
Blvd	Cypress Waters	As of the date you file, the claim is: Check all that apply.			
	III, TX 75019	Contingent			
Number, S	Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes th	e debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 on	•	☐ An agreement you made (such as mortgage or s car loan)	secured		
Debtor 2 on		_			
	d Debtor 2 only of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
	is claim relates to a	Other (including a right to offset)			
	Opened 04/19 Last				
Date debt was		Last 4 digits of account number 4436	3		

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Debtor 1 Rosecarol Nina Lundy		Case number (if known)				
First Name Middle Na	ame Last Name	-				
2.2 State Farm Bank	Describe the property that secures the claim:	\$64,318.00	Unknown	Unknown		
Creditor's Name	Automobile					
Attn: Bankrupcty Po Box 3298 Milwaukee, WI 53201  Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all tha apply.  Contingent Unliquidated	t				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.					
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or secured car loan)					
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lier ☐ Judgment lien from a lawsuit	n)				
☐ Check if this claim relates to a community debt	Other (including a right to offset)					
Opened 06/18 Last Active 10/19	Last 4 digits of account number 000	01				
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	\$314,775.00	$ar{\mathbf{J}}$			
If this is the last page of your form, add	. •	\$314,775.00				

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Debtor 1 Rosecarlo Nina Lundy Debtor 2 First Name   Last Name   Last Name    United States Bankruptory Court for the: MIDDLE DISTRICT OF FLORIDA  Case number   Check if this is an amended filling  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  3e as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases (Circular Form 106/D) be not include any creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases (Circular Form 106/D) be not include any creditors with NONPRIORITY diams. List the other party to any executory contracts or unexpired leases (Circular Form 106/D) be not include any creditors in section of the count with none of the continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).  Part 3: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have nonpriority unsecured claims against you?    No. Go to Part 2.   Yes.  4. List all of Your NONPRIORITY Unsecured Claims  1. Do any creditors have nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. It a coditor has more than one nonpriority unsecured claims in the ordino saparately for each claim is the ordino saparately for each claim. For each claim last, illustration flog of Part 2.  4. List all of Your NonPRIORITY Unsecured Claims  1 No. Do any creditors have nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. It a coditor has more than one nonpr		0430 0.13	DR 0-1022 OF II	DOO'T THEG	11/20/10 1 age 20	7 01 02
First Name	Fill in this	information to identify your	case:			
First Name	Debtor 1	Rosecarol Nina I	undv			
United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA    Case number				Last Name		
United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA  Case number   Case		First Name	Middle North	Last Name		
Case number   Check if this is an amended filing	(Spouse if, filin	g) First Name	Middle Name	Last Name		
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Bas a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NOMPRIORITY claims. List the other party to revenue to contracts or unscripted leases that could result in a claim. Also list executory contracts on Schedule Als: Property (Official Form 1666). Do not include any creditors with PRIORITY claims and Part 2 for creditors with PRIORITY claims and Part 3 for creditors with PRIORITY claims. Also list executory Contracts on Schedule Als: Property (Inform 1666) Do not include any creditors with part allty secured claims that are listed in eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your amen and case number (if known).  Part 3: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No on by creditors have nonpriority unsecured claims against you?  No you have nothing to report in this part. Submit this form to the court with your other schedules.  1 Yes.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the order oreditors in Part 3. If you have more than three nonpriority unsecured daims fill out the Continuation Page of Part 2.  Nonpriority Creditor's Name  1235 N Dutton Ave Santa Rosa, CA 95401  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only Debtor 1 and D	United Stat	es Bankruptcy Court for the:	MIDDLE DISTRICT (	OF FLORIDA		
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be a complete and accurated as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. Liet the other party to my executory contracts on unexpired leases that could result in a dailin. Also list executory contracts on Schedule AB: Property (Official Form 106AB) and on on Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the eft. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your part 1:  List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  4. List All of Your nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has none nonpriority unsecured claims in the prediction separately for each claim. If a creditor has none nonpriority unsecured claims. If a creditor has none nonpriority unsecured claims. It is creditor has none reditor holds a particular claim, list the creditor with holds each claim. If a creditor has none nonpriority unsecured claims. If a creditor has none nonpriority unsecured claims file out the Continuation Page of Part 2.  American Financia	Case numb	per				
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  3. as a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party for your executory contracts or nuceyine clauses that could result in a claim. Also list executory contracts on Schedule AB Property (Official Form 1606.0) Do not include any creditors with Nave Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your amen and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Part 2: List All of Your nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Part 2: List All of Your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims affeatly included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims list out the Continuation Page of Part 2.  4.1 American Financial R  Last 4 digits of account number 9945	(if known)					☐ Check if this is an
Schedule E/F: Creditors Who Have Unsecured Claims  as a complete and accurate as possible. Use Part 1 for creditors with NONPRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to reventive contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 10649) and on Schedule C: Executory Contracts and Unexpired Leases (Official Form 1066). Do not include any creditors with partially secured claims that are listed in more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your variane and case number of knowing the page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your variane and case number of knowing the page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your variane and case number of knowing the page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your variane and case of the page						amended filing
Schedule E/F: Creditors Who Have Unsecured Claims  as a complete and accurate as possible. Use Part 1 for creditors with NONPRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to reventive contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 10649) and on Schedule C: Executory Contracts and Unexpired Leases (Official Form 1066). Do not include any creditors with partially secured claims that are listed in more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your variane and case number of knowing the page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your variane and case number of knowing the page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your variane and case number of knowing the page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your variane and case of the page	Official I	Form 106F/F				
ans a complete and accurret as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPEIORITY claims. List the other party to my executory contracts or unsprinded leases that coule feasith in a claim. Also list executory contracts on Schedule B. Property (Official Form 1966). Do not include any creditors with partially secured claims that are listed in Schedule D: Executory Contracts and Unexpired Leases (Official Form 1966). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property, If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the eft. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if Known).    Part 1:			/ho Have Unse	cured Claims		12/15
American Financial R  List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims, list the creditor sin particular claim. Is the debt in correct order in list the creditor shade a particular claim. Is the debt incurred?  American Financial R  Nomplority Creditor's Name  1235 N Dutton Ave Santa Rosa, CA 95401  Nonpriority Creditor's Name  1 Debtor 1 only  Debtor 1 only  Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 as Debtor 2 only Debtor 1 onlogical and Debtor 2 only Debtor 1 as Debtor 2 only Debtor 1 onlogical and Debtor 2 only Debtor 2 onlogical and Debtor 3 onlogical 3					Part 2 for creditors with NONPR	
1. Do any creditors have priority unsecured claims against you?    No. Go to Part 2.   The properties of the continuation of the part of the count with your other schedules.   No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.	Schedule G: Schedule D: left. Attach tl	Executory Contracts and Unex Creditors Who Have Claims Sense Continuation Page to this pa	oired Leases (Official Fore	m 106G). Do not include a space is needed, copy t	any creditors with partially secu he Part you need, fill it out, nun	ured claims that are listed in need the entries in the boxes on the
No. Go to Part 2:    Yes.	Part 1:	List All of Your PRIORITY U	nsecured Claims			
Part 2: List All of Your NONPRIORITY Unsecured Claims			ed claims against you?			
List All of Your NONPRIORITY Unsecured Claims  Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.  List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor sparately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  American Financial R Nonpriority Creditor's Name  Last 4 digits of account number 9945 \$0.00  Nonpriority Creditor's Name  Upened 8/10/12 Last Active 11/05/14  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Debtor 1 only   Contingent   Disputed Type of NoNPRIORITY unsecured claims:    Debtor 2 only   Disputed   Disputed		Go to Part 2.				
3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  American Financial R  Nonpriority Creditor's Name  1235 N Dutton Ave Santa Rosa, CA 95401  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Contingent  Debtor 2 only  Inliquidated  Debtor 2 only  At least one of the debtors and another claim is for a community debt list the claim subject to offset?  No  No  Debtor 1 sin de community debt list he claim subject to offset?  No  Debtor 2 only obligations arising out of a separation agreement or divorce that you did not report as priority claims  No  Debtor 1 only obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debtor 1 only obligations arising plans, and other similar debts	☐ Yes.					
3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  American Financial R  Nonpriority Creditor's Name  1235 N Dutton Ave Santa Rosa, CA 95401  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Contingent  Debtor 2 only  Inliquidated  Debtor 2 only  At least one of the debtors and another claim is for a community debt list the claim subject to offset?  No  No  Debtor 1 sin de community debt list he claim subject to offset?  No  Debtor 2 only obligations arising out of a separation agreement or divorce that you did not report as priority claims  No  Debtor 1 only obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debtor 1 only obligations arising plans, and other similar debts	Part 2:	ist All of Your NONPRIORI	TY Unsecured Claims			
No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  Total claim  American Financial R Nonpriority Creditor's Name  1235 N Dutton Ave Santa Rosa, CA 95401 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Disputed  At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 2 betts of a community claims Olive Is the claim subject to offset? Debtor 2 betts of a possible of the court with your other schedules.  If a creditor has more than one nonpriority unsecured claims its. Do not list claims already included in Part 1. If more than three nonpriority unsecured claims its. Do not list claims already included in Part 1. If more than three nonpriority unsecured claims its. Do not list claims already included in Part 1. If more than three nonpriority unsecured claims is continued in Part 1. If more than three nonpriority unsecured claims its continued in Part 1. If more than three nonpriority unsecured claims its continued in Part 1. If more than three nonpriority unsecured claims its continued in Part 1. If more than three nonpriority unsecured claims its check all that apply  Check if this claim is for a community debt in Part 2.  Disputed  Type of NoNPRIORITY unsecured claims is check all that apply  Disputed  Type of NoNPRIORITY unsecured claims is check all that apply  Disputed  Disputed  Type of NoNPRIORITY unsecured claims is				?		
List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.    American Financial R					dulos	
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.    American Financial R	_	rou have nothing to report in this	oart. Submit this form to the	court with your other sche	dules.	
unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.    American Financial R	Yes.					
American Financial R Nonpriority Creditor's Name  1235 N Dutton Ave Santa Rosa, CA 95401 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No No Debtor 1 onfset? Debtor 2 onfset City State Zip Code Santa Rosa, CA 95401 As of the date you file, the claim is: Check all that apply  Contingent Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 onfset? Debtor 2 onfset? Debtor 2 onfset? Debtor 3 onfset? Debtor 4 least one of the debtors and another report as priority claims Debtor 4 onfset? Debtor 5 onfset? Debtor 6 none Type of NONPRIORITY unsecured claim: Debtor 8 onfset? Debtor 6 none Type of NONPRIORITY unsecured claim: Debtor 7 onfset Student loans Debtor 8 onfset Student loans Debtor 9 onfset Student loan	unsecure than one	ed claim, list the creditor separate	ly for each claim. For each	claim listed, identify what t	ype of claim it is. Do not list claims	s already included in Part 1. If more
Nonpriority Creditor's Name  1235 N Dutton Ave Santa Rosa, CA 95401  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Contingent Unliquidated Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only Disputed At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  No  No  Debtor 1 contingent Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts						Total claim
1235 N Dutton Ave Santa Rosa, CA 95401  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Contingent Disputed  Debtor 2 only Disputed  At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  Debts or 2 onfset Debts or 3 community debt Street Claim Street Cla	4.1 <b>A</b> n	nerican Financial R	Last 4 di	gits of account number	9945	\$0.00
1235 N Dutton Ave   Santa Rosa, CA 95401	Nor	npriority Creditor's Name	<del></del>			
Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim: Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	12	35 N Dutton Ave	When wa	is the debt incurred?		Active
Who incurred the debt? Check one.  □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts	Sa	nta Rosa, CA 95401		is the dept mounted.	11/03/14	<del></del>
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		• •		date you file, the claim i	s: Check all that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No □ Debts to pension or profit-sharing plans, and other similar debts	_					
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		•		=		
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		•				
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts		,	_ '			
debt	_				I claim:	
Is the claim subject to offset?  ■ No  □ Debts to pension or profit-sharing plans, and other similar debts			munity		rotion agreement division in	iou did not
■ No □ Debts to pension or profit-sharing plans, and other similar debts					ration agreement or divorce that y	ou aia not
☐ Yes		No		•	g plans, and other similar debts	
		Yes	Other	Specify Real Estate	Specific	

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Debtor	1 Rosecarol Nina Lundy		Case number (if known)	
4.2	Bank of America	Last 4 digits of account number	1550	\$8,358.00
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634	When was the debt incurred?	Opened 07/05 Last Active 10/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify Credit Card		
4.3	Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number	3666	\$0.00
	Attn: Bankruptcy Po Box 982238 El Paso, TX 79998	When was the debt incurred?	Opened 12/11 Last Active 3/05/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Credit Card	<u> </u>	
4.4	Bank of America	Last 4 digits of account number	5561	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 982238 El Paso, TX 79998	When was the debt incurred?	Opened 10/07 Last Active 08/11	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	$\square$ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Real Estate	Mortgage	

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Debto	Rosecarol Nina Lundy		Case number (if known	n)	
4.5	Bb&t Nonpriority Creditor's Name	Last 4 digits of account number	1001		\$0.00
	Credit Card Disputes Wilson, NC 27894	When was the debt incurred?	Opened 12/11 I 9/27/13	Last Active	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separate a priority decimal.	aration agreement or div	orce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plans, and other simil	ar dobte	
	■ No			ai debis	
	Yes	Other. Specify Automobile	•		
4.6	BB&T Nonpriority Creditor's Name	Last 4 digits of account number	3056		\$9,311.00
	Attn: Bankruptcy Po Box 1847	When was the debt incurred?	Opened 07/13 Last Active 10/19		
	Wilson, NC 27894  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	•	,		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	No	Debts to pension or profit-sharing	g plans, and other simil	ar debts	
	Yes	Other. Specify Credit Card	l		
4.7	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	7208		\$0.00
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 08/10 I 08/13	Last Active	
	Salt Lake City, UT 84130  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	ration agreement or div	orce that you did not	
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing		ar debts	
	Yes	■ Other. Specify Charge Acc	count		

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Debto	Rosecarol Nina Lundy		Case number (if known)	
4.8	Chase Auto Finance Nonpriority Creditor's Name	Last 4 digits of account number	3606	\$0.00
	Attn: Bankruptcy Po Box 901076 Fort Worth, TX 76101	When was the debt incurred?	Opened 09/09 Last Active 3/15/11	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured  ☐ Student loans ☐ Obligations arising out of a sepa	d claim: ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No □ Yes	Other. Specify Automobile		
4.9	Citi/Sears	Last 4 digits of account number	0796	\$10,864.00
	Nonpriority Creditor's Name Citibank/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 02/84 Last Active 09/19	
	St Louis, MO 63179  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card		
4.1	Citi/Sears	Last 4 digits of account number	1017	\$0.00
	Nonpriority Creditor's Name Citibank/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 07/02 Last Active 02/06	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		

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Debto	Rosecarol Nina Lundy		Case number (if known)	
4.1	Citibank	Last 4 digits of account number	3687	\$0.00
	Nonpriority Creditor's Name Citicorp/Attn: Centralized Bankruptcy Po Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	Opened 4/01/74 Last Active 5/13/11	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Carc		
4.1	Citibank/Best Buy	Last 4 digits of account number	7208	\$2,871.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 790441 St. Louis, MO 63179	When was the debt incurred?	Opened 8/02/10 Last Active 09/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Charge Acc		
4.1	Comenity Bank Nonpriority Creditor's Name	Last 4 digits of account number	0111	\$0.00
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 04/97 Last Active 08/10	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	L. L. L.	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	malana and other 1. W. 1.14	
	No	☐ Debts to pension or profit-sharin	• •	
	☐ Yes	■ Other. Specify Charge Acc	count	

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Debto	Rosecarol Nina Lundy		Case number (if known)	
4.1	Comenity Bank/King Size	Lock 4 distinct on account women	4390	\$0.00
4	Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number  When was the debt incurred?	Opened 11/12 Last Active	<b>40.00</b>
	Po Box 182125 Columbus, OH 43218	when was the debt incurred?	9/04/17	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1 5	Comenity Bank/King Sizes  Nonpriority Creditor's Name	Last 4 digits of account number	4169	\$0.00
	Attn: Bankruptcy Po Box 182125	When was the debt incurred?	Opened 05/03 Last Active 4/12/04	
	Columbus, OH 43218  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	I alaim.	
	At least one of the debtors and another	Student loans	i Claiiii.	
	☐ Check if this claim is for a community debt	<u></u>	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1	Comenity Capital Bank/HSN		2295	\$0.00
6	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0.00
	Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 08/11 Last Active 10/28/15	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane and other similar data.	
	■ No	Debts to pension or profit-sharin		
	☐ Yes	■ Other, Specify Charge Acc	count	

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Debtor	1 Rosecarol Nina Lundy		Case number (if kno	wn)	
4.1	Deptartment Store National Bank/Macv's	Last 4 digits of account number	8930		Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040	When was the debt incurred?	Opened 09/94 12/17/94	Last Active	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	V	
	Who incurred the debt? Check one.	•		•	
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or d	livorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other sim	nilar debts	
	Yes	■ Other. Specify Charge Acc	count		
4.1	Deptartment Store National				
8	Bank/Macy's Nonpriority Creditor's Name	Last 4 digits of account number	7891		\$0.00
	Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040	When was the debt incurred?	Opened 11/86 3/20/19	Last Active	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	у	
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or d	livorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other sim	nilar debts	
	Yes	Other. Specify Charge Acc	count		
4.1	Ditech	Last 4 digits of account number	8857		\$0.00
9	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 10/07	Last Active	
	Po Box 6172 Rapid City, SD 57709	When was the debt incurred?	8/10/12		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	y	
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt	☐ Obligations arising out of a sepa	ration agreement or d	livorce that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharin	g plans, and other sim	nilar debts	
	Yes	Other Specify Real Estate	Mortgage		

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Debt	ebtor 1 Rosecarol Nina Lundy		Case number (if known)	
l.2 )	Mr. Cooper  Nonpriority Creditor's Name	Last 4 digits of account number	7029	\$0.00
	Attn: Bankruptcy 8950 Cypress Waters Blvd Coppell, TX 75019	When was the debt incurred?	Opened 8/06/12 Last Active 12/01/17	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Lateta	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?		aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	on plane, and other similar debts	
	Yes	■ Other. Specify Real Estate		
4.2			F000	
	Mr. Cooper Nonpriority Creditor's Name	Last 4 digits of account number	5960	\$0.00
	Attn: Bankruptcy Po Box 619098	When was the debt incurred?	Opened 8/06/12 Last Active 8/10/16	
	Dallas, TX 75261  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.		,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Real Estate	Mortgage	
1.2	North American Savings  Nonpriority Creditor's Name	Last 4 digits of account number	2386	\$0.00
	12498 S 71 Hwy Grandview, MO 64030	When was the debt incurred?	Opened 04/19 Last Active 06/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	∏ Yes	■ Other Openity Real Estate	Mortgage	

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1 Rosecarol Nina Lundy		Case number (if known)	
North American Savings	Last 4 digits of account number	6787	\$0.0
Nonpriority Creditor's Name	_		
12498 S 71 Hwy Grandview, MO 64030	When was the debt incurred?	Opened 05/18 Last Active 06/18	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Real Estate	Mortgage	
State Farm Bank	Last 4 digits of account number	0001	\$0.0
Nonpriority Creditor's Name	_		
Attn: Bankrupcty Po Box 3298	When was the debt incurred?	Opened 03/11 Last Active 12/11	
Milwaukee, WI 53201	when was the dept incurred:	12/11	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Automobile	9	
State Farm Bank	Last 4 digits of account number	0001	\$0.0
Nonpriority Creditor's Name			<u> </u>
Attn: Bankrupcty		Opened 10/16 Last Active	
Po Box 3298 Milwaukee, WI 53201	When was the debt incurred?	07/18	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	•	11,7	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	•	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other Specify Automobile		

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Debto	Rosecarol Nina Lundy		Case number (if known)	
4.2	State Farm Bank	Last 4 digits of account number	0001	\$0.00
	Nonpriority Creditor's Name	_	On an ad 07/45 I and Antina	
	Attn: Bankrupcty Po Box 3298	When was the debt incurred?	Opened 07/15 Last Active 10/16	
	Milwaukee, WI 53201	_		
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a sepa report as priority claims</li> </ul>	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debts	
		·		
	Yes	Other. Specify Automobile		
4.2 7	Suntrust Bank	Last 4 digits of account number	8445	\$4,859.00
	Nonpriority Creditor's Name	_		
	Attn: Bankruptcy Mail Code VA-RVW-6290 PO Box	When was the debt incurred?	Opened 09/10 Last Active 10/19	
	85092	when was the dept incurred:	10/13	
	Richmond, VA 23286	_		
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	□ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.2			0004	
8	Syncb/Jewerly TV  Nonpriority Creditor's Name	Last 4 digits of account number	8284	\$0.00
	Attn: Bankruptcy		Opened 04/09 Last Active	
	Po Box 965060	When was the debt incurred?	12/12/18	
	Orlando, FL 32896			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Пол		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d claim:	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	J Claiii.	
	☐ Check if this claim is for a community debt		and in a company of the same that the same that	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Charge Acc	count	

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or 1 Rosecarol Nina Lundy		Case number (if known)	
Synchrony Bank	Last 4 digits of account number	1322	\$0.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 04/05 Last Active 10/05	
Orlando, FL 32896  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		
Synchrony Bank	Last 4 digits of account number	1836	\$0.0
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 09/05 Last Active 02/06	
Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		
Synchrony Bank/Care Credit	Last 4 digits of account number	1346	\$0.0
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 3/31/10 Last Active 10/03/10	
Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	<b>3</b>	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	■ Other. Specify Charge Acc	count	

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or 1 Rosecarol Nina Lundy		Case number (if known)	
Synchrony Bank/Lowes	Last 4 digits of account number	6467	\$7,860.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando El 23806	When was the debt incurred?	Opened 06/09 Last Active 09/19	
Orlando, FL 32896  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	-		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d alaim.	
At least one of the debtors and another	Student loans	d Claim:	
Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debte	
■ No □ Yes	Other. Specify Charge Acc		
Synchrony Bank/QVC  Nonpriority Creditor's Name	Last 4 digits of account number	9975	\$5,845.0
Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 08/08 Last Active 10/19	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	■ Other. Specify Charge Acc	count	
Synchrony Bank/Sams	Last 4 digits of account number	2321	\$0.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 07/02 Last Active 07/07	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	-		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	u Ciaiiii.	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	iration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other. Specify		
• • •	Other, Specify		

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Rosecarol Nina Lundy		Case number (if known)	
Synchrony Bank/Shop NBC	Last 4 digits of account number	6015	\$0.00
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0.0
Attn: Bankruptcy		Opened 10/07 Last Active	
Po Box 965060 Orlando, FL 32896	When was the debt incurred?	08/12	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	<u> </u>	
Synchrony Bank/ShopNBC	Last 4 digits of account number	5360	\$0.00
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0.00
Attn: Bankruptcy Dept		Opened 10/15/12 Last Active	
Po Box 965060	When was the debt incurred?	7/28/15	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	o plans, and other similar debts	
□ Yes	■ Other. Specify Charge Acc	· ·	
Target Nonpriority Creditor's Name	Last 4 digits of account number	4251	\$0.00
Attn: Bankruptcy		Opened 12/00 Last Active	
Po Box 9475	When was the debt incurred?	03/06	
Minneapolis, MN 55440 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	,	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other Specify		

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Debt	ebtor 1 Rosecarol Nina Lundy		Case number (if known)		
4.3 8	Time Investment Company, Inc.  Nonpriority Creditor's Name	Last 4 digits of account number		\$9,084.00	
	Attn: Bankruptcy 100 North 6th Avenue West Bend, WI 53095  Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim i	Opened 03/18 Last Active 10/10/19 is: Check all that apply		
	Who incurred the debt? Check one.	,	on one an inat apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Check Cred	dit Or Line Of Credit		
1.3	Us Bank Home Mortgage  Nonpriority Creditor's Name	Last 4 digits of account number	2980	\$0.00	
	Attn: Bankruptcy 800 Nicollet Mall Minneapolis, MN 55402	When was the debt incurred?	Opened 05/18 Last Active 4/23/19		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	$\square$ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin			
	Yes	Other. Specify VA Real Es	tate Mortgage		
1.4	Wells Fargo Dealer Services  Nonpriority Creditor's Name	Last 4 digits of account number	7166	\$0.00	
	Attn: Bankruptcy Po Box 19657	When was the debt incurred?	Opened 09/13 Last Active 7/14/15		
	Irvine, CA 92623  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	□yes	Other Specify Automobile			

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1 Rosecarol Nina Lundy		Case number (if known)	
Wells Fargo Home Mor	Last 4 digits of account number	3654	\$0.
Nonpriority Creditor's Name		On and 100/40 Least Action	
Attn: Written Correspondence/Bankruptcy	When was the debt incurred?	Opened 08/12 Last Active 05/18	
Mac#2302-04e Pob 10335 Des Moines, IA 50306	When was the dept incurred?	03/10	
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Real Estate	Mortgage	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.		6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 59,052.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 59,052.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this infor						
Debtor 1	Rosecarol Nina Lundy					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF FLORIDA				
Case number						
(if known)						Check if this is an
						amended filing

#### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				State what the contract or lease is for		
2.1							
	Name						
	Number	Street			_		
	City		State	ZIP Code			
2.2							
	Name						
	Number	Street					
	City		State	ZIP Code	<del>_</del>		
2.3							
	Name						
	Number	Street			_		
	City		State	ZIP Code	<del>_</del>		
2.4							
	Name						
	Number	Street			_		
	City		State	ZIP Code	<u> </u>		
2.5							
	Name				_		
	Number	Street					
	City		State	ZIP Code	<u> </u>		

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Fill in this	information to identify you	r case:			
Debtor 1	Rosecarol Nina				
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case num (if known)	ber			_	Check if this is an amended filing
O(i, ;	1.5			·	amenaea ming
	I Form 106H				
Sched	lule H: Your Cod	debtors			12/15
your name	nd number the entries in the and case number (if known you have any codebtors? (I	n). Answer every question		o this page. On the top of any Ad as a codebtor.	ullional Pages, write
■ No □ Yes	3				
Arizon	a, California, Idaho, Louisian Go to line 3.	a, Nevada, New Mexico, Pu	erto Rico, Texas, Washi	<b>y?</b> (Community property states and ngton, and Wisconsin.)	territories include
☐ Yes	s. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make s	if your spouse is filing with you. sure you have listed the creditor 6G). Use Schedule D, Schedule E	on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The creditor to wh Check all schedules that apply	-
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G	<u> </u>
	Number Street City	State	ZIP Code	_	
3.2	Name			Schedule D, line Schedule E/F, line Schedule G, line	
	Number Street City	State	ZIP Code	_	

Official Form 106H Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Fill	in this information to identify your c	ase:								
Del	btor 1 Rosecarol N	lina Lundy			_					
1 -	btor 2 buse, if filing)				_					
Uni	ited States Bankruptcy Court for the	: MIDDLE DISTRICT C	F FLORIDA							
	se number 		-			□ Ar		ed filing ent showir	ng postpetition	
<u>O</u>	fficial Form 106I					$\overline{M}$	M / DD/ Y	YYYY		
S	chedule I: Your Inc	ome								12/15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment	are married and not fili Ir spouse is not filing w	ng jointly, and your i ith you, do not inclu	spouse i de infori	is liv mati	ing with on about	you, incl your spo	ude infori ouse. If m	mation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-f	iling spouse	
	If you have more than one job,	Empleyment status	☐ Employed					oyed		
atta info	attach a separate page with information about additional employers.	Employment status	■ Not employed				☐ Not e	mployed		
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Pa	rt 2: Give Details About Mor	nthly Income								
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any	line, write	\$0 in the	space. In	clude your no	n-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	emplo	oyers for t	that perso	on on the li	ines below. If	you need
						For Deb	otor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross Income. Add lin	ne 2 + line 3		4.	\$		0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1	Rosecarol Nina Lundy	_		Case	e number ( <i>if kn</i>	own)			
					Fo	r Debtor 1			Debtor 2 or	
	Cop	y line 4 here	4.		\$	0	.00	\$	N/A	
5.	List	all payroll deductions:			_			_		_
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	0	.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b	).	\$		.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	50	<b>;</b> .	\$	0	.00	\$	N/A	<u> </u>
	5d.	Required repayments of retirement fund loans	5d	ı.	\$	0	.00	\$	N/A	<u> </u>
	5e.	Insurance	5e	<b></b> .	\$	0	.00	\$	N/A	<u> </u>
	5f.	Domestic support obligations	5f.		\$	0	.00	\$	N/A	\
	5g.	Union dues	5g	J.	\$	0	.00	\$	N/A	<u> </u>
	5h.	Other deductions. Specify:	5h	1.+	\$_	0	.00	+ \$	N/A	<u> </u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	0	.00	\$	N/A	<u>\</u>
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	0	.00	\$	N/A	<u> </u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	90		¢	0	.00	Ф	N/A	
	8b.	monthly net income.  Interest and dividends	8a 8b		\$_ \$		.00	\$_ \$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent		٠.	Φ_	U	.00	Φ_	N/A	<u> </u>
	oc.	regularly receive Include alimony, spousal support, child support, maintenance, divorce			•			•		
		settlement, and property settlement.	80		\$_		.00	\$_	N/A	_
	8d.	Unemployment compensation	8d		\$_		.00	\$_	N/A	
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8e e 8f.		\$_ \$	1,334 0	.00	\$ \$	N/A N/A	_
	8g.	Pension or retirement income	8g	J.	\$	100	.54	\$	N/A	<u> </u>
	8h.	Other monthly income. Specify: Workers Compensation Annuity	8h	1.+	\$	612	.98	+ \$	N/A	_
		Joint and Survivor Annuity			\$	550	.85	\$	N/A	<u> </u>
		VA DIC Payment	_		\$	1,599	.13	\$	N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	4,198	.00	\$	N/	A
10.		culate monthly income. Add line 7 + line 9.	10.	\$_		4,198.00	+ \$_		N/A	4,198.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.								
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your r friends or relatives.  iot include any amounts already included in lines 2-10 or amounts that are not cify:	depe						Schedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							12. \$ <b>Comb</b> i	
13.	Do y	ou expect an increase or decrease within the year after you file this form	?						month	ly income
		No.								
		Yes. Explain:								

Eill	in this informa	tion to identify yo	ur casa.			I		
	otor 1					Char	ck if this is:	
Dep	ntor r	Rosecarol Ni	ina Luna	У			An amended filing	
1	otor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter
``	, 0,	untay Court for the	MIDDLI	E DISTRICT OF FLORIDA			MM / DD / YYYY	
		upicy Court for the.	IVIIDULI	E DISTRICT OF FLORIDA			IVIIVI / DD / TTTT	
	e number nown)							
		rm 106J						
		J: Your I			. Climate and have be	- 41	-11	12/15
info	ormation. If m		eded, atta	. If two married people are ch another sheet to this to n.				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to	s Debtor 2 live i	n a separ	ate household?				
	□ N □ Y	_	t file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No □ Yes
								□ Yes □ No
							_	□Yes
3.		enses include f people other th	nan	No				
	yourself and	d your depender	nts? ⊔	Yes				
Est exp	imate your ex	ate Your Ongoin openses as of your address as of your address as of your address as of your address as of your and a second a second and a second a second and a second	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this fo lemental <i>Schedul</i> e	orm as a su J, check th	pplement in a Cha e box at the top o	apter 13 case to report f the form and fill in the
the		n assistance and		government assistance it cluded it on Schedule I: Y			Your exp	enses
,		•						
4.		or home ownersl and any rent for the		ses for your residence. In rot.	nclude first mortgage	e 4. \$		1,362.13
	If not includ	led in line 4:						
		estate taxes				4a. \$		0.00
	•	rty, homeowner's maintenance re		's insurance ıpkeep expenses		4b. \$ 4c. \$		0.00 41.00
		owner's associat				4d. \$		0.00
5.	Additional r	nortgage payme	ents for yo	our residence, such as hor	ne equity loans	5. \$		0.00

6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Sec. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Law Service  Pool Service  Bug/Pest Control Service  Regident Control Service  Sec. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. Sec. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. Sec. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. Sec. Charitable contributions and religious donations 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. Sec. Charitable contributions and religious donations 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Sec. Sec. Sec. Sec. Sec. Sec. Sec. Sec	250.00 90.00 249.00 100.00 125.00 61.00 400.00 0.00 60.00 135.00 20.00 120.00 10.00 0.00
6a.       Electricity, heat, natural gas       6a.       \$         6b.       Water, sewer, garbage collection       6b.       \$         6c.       Telephone, cell phone, Internet, satellite, and cable services       6c.       \$         6d.       Other. Specify: Law Service       6d.       \$         Pool Service       \$         Bug/Pest Control Service       7.       \$         7.       Food and housekeeping supplies       7.       \$         8.       Childcare and children's education costs       8.       \$         9.       Clothing, laundry, and dry cleaning       9.       \$         10.       Personal care products and services       10.       \$         11.       Medical and dental expenses       11.       \$         12.       Transportation. Include gas, maintenance, bus or train fare.       10.       \$         12.       Transportation. Include gas, maintenance, bus or train fare.       12.       \$         13.       Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$         14.       Charitable contributions and religious donations       14.       \$         15a.       Life insurance       15a.       \$         15b.	90.00 249.00 100.00 125.00 61.00 400.00 0.00 60.00 135.00 20.00 120.00
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Law Service Pool Service Bug/Pest Control Service  Childcare and children's education costs 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. Sentertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2	90.00 249.00 100.00 125.00 61.00 400.00 0.00 60.00 135.00 20.00 120.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Law Service Pool Service Bug/Pest Control Service  8  Childcare and children's education costs 8  Childcare and children's education costs 9  Clothing, laundry, and dry cleaning 9  10  Personal care products and services 10  Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12  Transportation. Include gas, maintenance, bus or train fare. Do not include contributions and religious donations 14  Charitable contributions and religious donations 15  Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2	249.00 100.00 125.00 61.00 400.00 0.00 60.00 135.00 20.00 120.00
6d. Other. Specify: Law Service Pool Service Bug/Pest Control Service  8  7. Food and housekeeping supplies 8  8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$  10. Personal care products and services 10. \$  11. Medical and dental expenses 11. \$  12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$  13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$  14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. \$  17c. Vehicle in Vehicle 2 17d. \$  17d	100.00 125.00 61.00 400.00 0.00 60.00 135.00 20.00 120.00
Pool Service Bug/Pest Control Service 7. Food and housekeeping supplies 8. Childcare and children's education costs 8. Clothing, laundry, and dry cleaning 9. \$ 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Specify: 15d. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2	125.00 61.00 400.00 0.00 60.00 135.00 20.00 120.00
Bug/Pest Control Service 7. Food and housekeeping supplies 8. Childcare and children's education costs 8. \$ 9. Clothing, laundry, and dry cleaning 9. \$ 10. Personal care products and services 10. Medical and dental expenses 11. \$ 11.	61.00 400.00 0.00 60.00 135.00 20.00 120.00 10.00
7. Food and housekeeping supplies 7. \$ 3. Childcare and children's education costs 8. \$ 3. Clothing, laundry, and dry cleaning 9. \$ 3. Clothing, laundry, and cry clothing 9. \$ 3. Clothing, laundry,	400.00 0.00 60.00 135.00 20.00 120.00 10.00
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Clothing, laundry, and dry cleaning Personal care products and services  Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2	60.00 135.00 20.00 120.00 10.00
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2. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  3. Entertainment, clubs, recreation, newspapers, magazines, and books 4. Charitable contributions and religious donations 5. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$  17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2	120.00
Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2	10.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books 4. Charitable contributions and religious donations 5. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. S  6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 16. \$  17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2	
4. Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. S  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  16. \$  Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2	0.00
5. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. S  6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$  17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2	
15a. Life insurance       15a. \$         15b. Health insurance       15b. \$         15c. Vehicle insurance       15c. \$         15d. Other insurance. Specify:       15d. \$         6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       16. \$         Specify:       16. \$         7. Installment or lease payments:       17a. \$         17a. Car payments for Vehicle 1       17a. \$         17b. Car payments for Vehicle 2       17b. \$	
15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$  7. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. \$  17c. Specify: 17c. Car payments for Vehicle 2	
15c. Vehicle insurance 15c. \$ 15d. Other insurance. Specify: 15d. \$ 16d. \$ 15d. \$ 16d.	16.00
15c. Vehicle insurance 15c. \$ 15d. Other insurance. Specify: 15d. \$ 15d.	135.50
5. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  7. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. \$  17c. \$  17c. \$  17d. \$	105.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  7. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. \$  17c. \$  17d. \$  17d. \$	0.00
7. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. \$ 17b. \$	<del></del>
17a. Car payments for Vehicle 117a. \$17b. Car payments for Vehicle 217b. \$	0.00
17b. Car payments for Vehicle 2	1,115.63
· <u></u>	0.00
	0.00
17d. Other. Specify: 17d. \$	0.00
8. Your payments of alimony, maintenance, and support that you did not report as	0.00
deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	0.00
9. Other payments you make to support others who do not live with you.	0.00
Specify: 19.	
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property 20a. \$	0.00
20b. Real estate taxes 20b. \$	0.00
20c. Property, homeowner's, or renter's insurance 20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses 20d. \$	0.00
20e. Homeowner's association or condominium dues 20e. \$	0.00
1. <b>Other:</b> Specify: 21. +\$	0.00
	0.00
2. Calculate your monthly expenses	
	,395.26
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	
22c. Add line 22a and 22b. The result is your monthly expenses.	,395.26
3. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$	4,198.00
23b. Copy your monthly expenses from line 22c above.	4,395.26
177	
23c. Subtract your monthly expenses from your monthly income.	
The result is your <i>monthly net income</i> .	-197.26
, ,	
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease modification to the terms of your mortgage?	
■ No.	se because of a
☐ Yes. Explain here:	se because of a

Fill in this inform	ation to identify you	r case:			
Debtor 1	Rosecarol Nina	Lundy			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
0					
Case number					☐ Check if this is an
					amended filing
Official Form  Declarati	•	an Individual	Debtor's Sch	nedules	12/15
If two married peo	pple are filing togeth	er, both are equally respo	nsible for supplying corre	ct information.	
obtaining money of years, or both. 18		in connection with a bank			nent, concealing property, or , or imprisonment for up to 20
Did you pay	or agree to pay som	eone who is NOT an atto	rney to help you fill out bar	nkruptcy forms?	
■ No					
☐ Yes. Na	ame of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	y of perjury, I declar true and correct.	e that I have read the sum	nmary and schedules filed	with this declaration	and
X /s/ Rose	carol Nina Lundy		X		
Roseca	rol Nina Lundy of Debtor 1		Signature of D	ebtor 2	
Date No.	ovember 26, 2019		Date		

Fill	in this inforn	nation to identify yoບ	r case:				
Deb	tor 1	Rosecarol Nina	Lundy				
		First Name	Middle Name	Last Name			
	otor 2	First Name	Middle Name	Last Name			
(Spot	use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA			
Cas	e number						
(if kno	_					☐ Check if this is an	
						amended filing	
Off	ficial Fo	rm 107					
		-	Affairs for Indiv	iduals Filing for	Bankruptcy	4/1:	
				are filing together, both a		for cumplying correct	
				o this form. On the top of			
num	ber (if knowr	n). Answer every que	stion.				
Part	Give D	Details About Your M	arital Status and Where Yo	ou Lived Before			
1.	What is you	r current marital stat	us?				
	_						
	☐ Married						
	Not mar	rried					
2.	During the last 3 years, have you lived anywhere other than where you live now?						
	_			-			
	■ No						
		at all of the places you	lived in the last 3 years. Do	not include where you live r	iow.		
	Debtor 1 Pr	ior Address:	Dates Debtor	1 Debtor 2 Prior	Address:	Dates Debtor 2	
			lived there			lived there	
						erritory? (Community property	
state	s and territori	ies include Arizona, Ca	alifornia, idano, Louisiana, N	levada, New Mexico, Puerto	Rico, Texas, wasningtor	i and wisconsin.)	
	No						
	☐ Yes. Ma	ake sure you fill out Sc	hedule H: Your Codebtors (	Official Form 106H).			
Part	Explai	in the Sources of You	ır Income				
4.	Did you have	e any income from e	nployment or from operat	ing a business during this	year or the two previou	s calendar years?	
	Fill in the total	al amount of income yo	ou received from all jobs and	d all businesses, including p	art-time activities.	•	
	If you are filin	ng a joint case and you	i have income that you rece	ive together, list it only once	under Debtor 1.		
	No						
	☐ Yes. Fill	I in the details.					
			Debtor 1		Debtor 2		
				Gross income		Grace income	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.		
				exclusions)		and exclusions)	

Official Form 107

Debtor 1 Rosecarol Nina Lundy		Case number (if known)				
Inclo and wing	you receive any other income ude income regardless of wheth other public benefit payments; nings. If you are filing a joint case each source and the gross income.  No Yes. Fill in the details.	ner that income is taxable. Ex pensions; rental income; inte se and you have income that	limony; child support; Socia ted from lawsuits; royalties; only once under Debtor 1.			
		Dobtor 4		Dobton 2		
		Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)	
	anuary 1 of current year until you filed for bankruptcy:	Other Income: Life Insurance Deceased Husband	\$20,137.03			
		VA Benefits	\$8,024.97			
		Worker's comp: Annuity	\$6,742.78			
		Social Security Retirement	\$14,679.50			
		Joint And Survivor Life Annuity	\$6,059.46			
		Retirement Income	\$1,105.94			
	calendar year: y 1 to December 31, 2018 )	Taxable Refunds, credits, or offsets	\$226.00			
		Pensions and annuities	\$15,412.00			
		Social Security Benefits	\$15,576.00			
	calendar year before that: y 1 to December 31, 2017)	Taxable Refunds, credits, or offsets	\$171.00			
		Pensions and annuities	\$15,412.00			
		Social Security Benefits	\$15,276.00			
Part 3:	List Certain Payments You	Made Before You Filed for	Bankruptcy			
6. Are □	either Debtor 1's or Debtor 2 No. Neither Debtor 1 nor D	's debts primarily consume	er debts? umer debts. Consumer debts	s are defined in 11 U.S.C. §	101(8) as "incurred by an	
	□ No. Go to line 7		lid you pay any creditor a tota aid a total of \$6,825* or more i		nd the total amount you	

paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 2

Del	otor 1 Rosecarol Nina Lundy		Cas	e number (if known)		
	not include payments t * Subject to adjustment on 4/01/22	to an attorney for this bank 2 and every 3 years after th		or after the date o	f adjustment.	
	Yes. Debtor 1 or Debtor 2 or both have During the 90 days before you filed			al of \$600 or more?		
	■ No. Go to line 7.					
	☐ Yes List below each credito	or to whom you paid a total domestic support obligation uptcy case.				
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 17 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partner or more of their voting	erships of which yo g securities; and ar	u are a genera ny managing ag	I partner; corporation gent, including one fo
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
<b>Par</b> 9.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi  No Yes. List all payments to an insider Insider's Name and Address  t4: Identify Legal Actions, Repossession Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.	Dates of payment  s, and Foreclosures  y, were you a party in an	Total amount paid	Amount you still owe tion, or administr	Reason for Include credi	this payment tor's name
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No. Go to line 11.  Yes, Fill in the information below.		erty repossessed, f	oreclosed, garnis	hed, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	i			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  No Yes. Fill in the details.		luding a bank or fir	nancial institution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Data	action was	Amount
	Ordanor Hame and Address	Describe the action the	organior took	taken		Allioulli

Debt	tor 1 Rosecarol Nina Lundy	Case number	(if known)	
	Within 1 year before you filed for bankruptcy, court-appointed receiver, a custodian, or ano	was any of your property in the possession of an ther official?	assignee for the bene	fit of creditors, a
	■ No			
I	□ Yes			
Part	5: List Certain Gifts and Contributions			
13.	_ ' ' '	, did you give any gifts with a total value of more t	han \$600 per person?	•
	No			
	Yes. Fill in the details for each gift.	<b>5</b> 11 11 17	D /	
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankruptcy	, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	No			
	Yes. Fill in the details for each gift or contrib	oution.		
	Gifts or contributions to charities that total more than \$600 Charity's Name	Describe what you contributed	Dates you contributed	Value
	Address (Number, Street, City, State and ZIP Code)			
Part	6: List Certain Losses			
	Within 1 year before you filed for bankruptcy or gambling?  ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
		with a constituent was a series of a start to a series of a series of a start to a series of a start to a series of a start to a series of a	Data of wave	Value of managements
	how the loss occurred Inclu	cribe any insurance coverage for the loss and the amount that insurance has paid. List pending trance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Part	7: List Certain Payments or Transfers			
(	consulted about seeking bankruptcy or prepa	did you or anyone else acting on your behalf pay ouring a bankruptcy petition? Ters, or credit counseling agencies for services require		rty to anyone you
I	□ No			
I	Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address	transferred	or transfer was	payment
	Email or website address Person Who Made the Payment, if Not You		made	
	Schatt, Hesser, McGraw PO Box 4440	Attorney Fees	9/30/2018	\$1,850.00
	Ocala, FL 34478 khesser@schatthesser.com			
-	abacus credit counseling	Credit Counseling	11/02/20219	\$25.00
	abacuscc.org			

Deb	otor 1 Rosecarol Nina Lundy			Case number	(if known)	
17.	Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that yo	ors or to make payment			or transfer any prope	erty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	value of any p	roperty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers minclude gifts and transfers that you have alread No	ousiness or financial aff ade as security (such as	airs? the granting of			
	☐ Yes. Fill in the details.  Person Who Received Transfer  Address	Description and property transfer		Describe payments paid in ex	any property or s received or debts schange	Date transfer was made
	Person's relationship to you  Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro  No  Yes. Fill in the details.		ny property to	a self-settled tr	rust or similar device	of which you are a
	Name of trust  Description and value of the property transferred					Date Transfer was made
Par	tt 8: List of Certain Financial Accounts, Inc	struments, Safe Deposi	t Boxes, and	Storage Units		made
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, asso □ No	or other financial accou	nts; certificate	es of deposit; s		
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acc instrument	cl m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
	Wells Fargo	XXXX-8904	■ Checking □ Savings □ Money M □ Brokerag □ Other	7, arket ac e tr m ui	losed: October 2019 Note: as joint ccount, ansferred oney to credit nion after usband's death	\$2,661.92
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy,	any safe depos	it box or other depos	itory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?

Debtor 1	Rosecarol	Nina	Lundy
00000	NOSCOLIO	HIIIA	Luliuv

Case number (if known)

22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
		No							
		Yes. Fill in the details.							
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Des	scribe the contents	Do you still have it?			
Par	t 9:	Identify Property You Hold or Control for	Someone Else						
23.	•	you hold or control any property that some	one else owns? Include any proper	rty yo	ou borrowed from, are storing for	, or hold in trust			
	_								
	_	No Yes. Fill in the details.							
	_	ner's Name dress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value			
Par	t 10:	Give Details About Environmental Inform	ation						
For	the p	ourpose of Part 10, the following definitions	apply:						
	toxi	ironmental law means any federal, state, or c substances, wastes, or material into the a llations controlling the cleanup of these su	air, land, soil, surface water, ground	_	•				
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
		<i>ardous material</i> means anything an enviror ardous material, pollutant, contaminant, or		s was	ste, hazardous substance, toxic s	ubstance,			
Rep	ort a	ll notices, releases, and proceedings that y	ou know about, regardless of wher	n the	y occurred.				
24.	Has	any governmental unit notified you that yo	u may be liable or potentially liable	e und	er or in violation of an environme	ental law?			
	■ No								
		Yes. Fill in the details.							
		ne of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice			
25.	Hav	Have you notified any governmental unit of any release of hazardous material?							
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice			
26.	Hav	e you been a party in any judicial or admini	strative proceeding under any envi	ironn	nental law? Include settlements a	and orders.			
	<b>=</b>	No							
	П	Yes. Fill in the details.				2			
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	cure of the case	Status of the case			
Par	t 11:	Give Details About Your Business or Cor	nnections to Any Business						
27.	With	nin 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of	the following connections to any	business?			
		$\hfill \square$ A sole proprietor or self-employed in a	trade, profession, or other activity,	, eith	er full-time or part-time				
		☐ A member of a limited liability company	y (LLC) or limited liability partnersh	nip (L	LP)				
Offic	ial Ear	m 107 Statement	of Financial Affairs for Individuals Filing	a for l	Bankruntev	nana			

# Case 3:19-bk-04522-JAF Doc 1 Filed 11/26/19 Page 48 of 62

Deb	otor 1	Rosecarol Nina Lundy		Case number (if known)
	1	☐ A partner in a partnership		
	1	☐ An officer, director, or managing ex	ecutive of a corporation	
	I	☐ An owner of at least 5% of the voting	g or equity securities of a corporation	
		No. None of the above applies. Go to F	Part 12.	
		Yes. Check all that apply above and fill	in the details below for each business.	
	Busi	iness Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
28.	Withi	in 2 years before you filed for bankrupt tutions, creditors, or other parties.	cy, did you give a financial statement to	anyone about your business? Include all financial
		No		
		Yes. Fill in the details below.		
	Nam		Date Issued	
		ress ber, Street, City, State and ZIP Code)		
Par	t 12:	Sign Below		
are t	true ai a bar	nd correct. I understand that making a		I I declare under penalty of perjury that the answers robtaining money or property by fraud in connection years, or both.
		ecarol Nina Lundy		
		rol Nina Lundy e of Debtor 1	Signature of Debtor 2	
Dat	e N	ovember 26, 2019	Date	
Did ■ N □ Y	lo	ttach additional pages to Your Stateme	ent of Financial Affairs for Individuals Fi	ling for Bankruptcy (Official Form 107)?
	lo		an attorney to help you fill out bankrup	
	50. 140		programme, reparer o rionos, besidianos	, and algrature (amount and 110).

				-
Fill in this infor	mation to identify your	case:		
Debtor 1	Rosecarol Nina L	.undy		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number (if known)				☐ Check if this is an amended filing
Official Fo		n for Individu	uals Filing Under	Chapter 7
	lividual filing under cha	pter 7, you must fill out to	this form if:	
You must file th	is form with the court v ever is earlier, unless th		ile your bankruptcy petition or	by the date set for the meeting of creditors, d copies to the creditors and lessors you list

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

## Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Nation Star/Mr. Cooper	■ Surrender the property.	■ No
name:	☐ Retain the property and redeem it.	
Description of 10160 SE 69th Ave Belleview,	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property FL 34420 Marion County securing debt:	☐ Retain the property and [explain]:	
Creditor's State Farm Bank	■ Surrender the property.	■ No
name:	☐ Retain the property and redeem it.	
Description of <b>Automobile</b>	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	

## Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

## Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

# Case 3:19-bk-04522-JAF Doc 1 Filed 11/26/19 Page 50 of 62

Debtor	1 Rosecarol Nina Lundy	Case number (if known)
	's name: otion of leased ty:	□ No
	's name: otion of leased ty:	□ No
	's name: otion of leased ty:	□ No
	's name: otion of leased ty:	□ No
	's name: otion of leased ty:	□ No
	's name: otion of leased ty:	□ No
Descrip Propert	· 	□ No □ Yes
Part 3: Under p	Sign Below  Denalty of perjury, I declare that I have indicated my intention about any y that is subject to an unexpired lease.	property of my estate that secures a debt and any personal
R	// Rosecarol Nina Lundy osecarol Nina Lundy gnature of Debtor 1  X Signature of Debtor 1	ature of Debtor 2
Da	November 26, 2019 Date	

Fill in	this information to identify your case:						rected in this form and	in Form
Debto	Rosecarol Nina Lundy				2A-1Sup	pp:		
Debto (Spous	or 2 e, if filing)				■ 1. Th	ere is no presu	imption of abuse	
Unite	d States Bankruptcy Court for the: Middle District of	Florida			ap	pplies will be m	o determine if a presultate and a determine if a de	
Case (if know	number					,	cial Form 122A-2).	
(							does not apply now be service but it could ap	
					☐ Che	ck if this is ar	n amended filing	
<u>Offi</u>	<u>cial Form 122A - 1</u>							
Cha	apter 7 Statement of Your Cui	rrent N	<b>l</b> lor	nthly Inc	come	<b>)</b>		10/19
attach case n	complete and accurate as possible. If two married people is a separate sheet to this form. Include the line number to wumber (if known). If you believe that you are exempted froing military service, complete and file Statement of Exemple:  Calculate Your Current Monthly Income	which the ad om a presum	dition ption	nal information of abuse becau	applies. ( use you d	On the top of an o not have prim	y additional pages, wri parily consumer debts o	te your name and or because of
1.	What is your marital and filing status? Check one or	nly.						
	Not married. Fill out Column A, lines 2-11.							
	$\square$ Married and your spouse is filing with you. Fill $\circ$	ut both Col	umns	A and B, lines	2-11.			
	☐ Married and your spouse is NOT filing with you.	You and y	our s	spouse are:				
	☐ Living in the same household and are not lega	ally separa	ited. I	Fill out both Co	olumns A	and B, lines 2	-11.	
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evadi	legally sepa	arated	d under nonbar	nkruptcy	law that applie	s or that you and you	
10 <sup>2</sup> the	in the average monthly income that you received from all (10A). For example, if you are filing on September 15, the 6-m 6 months, add the income for all 6 months and divide the tota uses own the same rental property, put the income from that property.	nonth period al by 6. Fill in	would the res	be March 1 thro sult. Do not inclu	ugh Augu de any ind	st 31. If the amore	unt of your monthly incon ore than once. For examp	ne varied during ble, if both
					Columi Debtor		Column B Debtor 2 or non-filing spouse	
	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and comm	nissio	ons (before all	\$	0.00	\$	
	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	payments	from	a spouse if	\$	0.00	\$	
1	All amounts from any source which are regularly portion or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	<b>t.</b> Include re d, your dep	egular ende	contributions nts, parents,	\$	0.00	\$	
	Net income from operating a business, profession,	, or farm						
				otor 1				
	Gross receipts (before all deductions)	· —	0.00					
	Ordinary and necessary operating expenses		0.00	Copy here ->	· ¢	0.00	\$	
	Net monthly income from a business, profession, or far	rm \$		Copy nere ->	• Ф	0.00	Ψ	
6.	Net income from rental and other real property		Deb	tor 1				
	Gross receipts (before all deductions)	\$ 0	0.00					
	Ordinary and necessary operating expenses	-\$ <b>0</b>	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	• \$	0.00	\$	
7.	nterest, dividends, and royalties				\$	0.00	\$	

Official Form 122A-1

Case number (if known)

					umn A otor 1		Columbo Debtoi		
8.	Unemployment compensation			\$		0.00	\$		
	Do not enter the amount if you contend that the amount received was a be the Social Security Act. Instead, list it here:	enefit u	ınder						
	For you \$ For your spouse \$	0.00	_						
			-						
	Pension or retirement income. Do not include any amount received that benefit under the Social Security Act. Also, except as stated in the next se not include any compensation, pension, pay, annuity, or allowance paid by United States Government in connection with a disability, combat-related disability, or death of a member of the uniformed services. If you received pay paid under chapter 61 of title 10, then include that pay only to the extendes not exceed the amount of retired pay to which you would otherwise by if retired under any provision of title 10 other than chapter 61 of that title.	entence y the injury o any re ent that be entit	e, do or tired t it tled	\$_		651.40	\$		
10	Income from all other sources not listed above. Specify the source and Do not include any benefits received under the Social Security Act; payme received as a victim of a war crime, a crime against humanity, or internation domestic terrorism; or compensation, pension, pay, annuity, or allowance United States Government in connection with a disability, combat-related disability, or death of a member of the uniformed services. If necessary, list sources on a separate page and put the total below.	ents onal or paid by injury o	y the						
	Oxford Life Insurance			\$	3	,356.17	\$		
			-	\$		0.00	\$		-
	Total amounts from separate pages, if any.		+	\$		0.00	\$		-
11	Calculate your total current monthly income. Add lines 2 through 10 fo each column. Then add the total for Column A to the total for Column B.	or \$		4,00	7.57	+ \$		Total	4,007.57
Pari	··								
12	Calculate your current monthly income for the year. Follow these step  12a. Copy your total current monthly income from line 11				Cop	y line 11	here=>	\$	4,007.57
	Multiply by 12 (the number of months in a year)							X	12
	12b. The result is your annual income for this part of the form							12b. \$	48,090.84
13	Calculate the median family income that applies to you. Follow these	steps:							
	Fill in the state in which you live.								
	Fill in the number of people in your household.								
	Fill in the median family income for your state and size of household.							13. \$	50,641.00
	To find a list of applicable median income amounts, go online using the lin for this form. This list may also be available at the bankruptcy clerk's office		ified	in the	e sepai	rate instruc	tions		
14	How do the lines compare?								
	14a. Line 12b is less than or equal to line 13. On the top of page 1 Go to Part 3.	I, checl	k box	1, <i>Ti</i>	here is	no presun	nption of a	abuse.	
	14b.  Line 12b is more than line 13. On the top of page 1, check be Go to Part 3 and fill out Form 122A-2.	ox 2, <i>TI</i>	he pr	esum	ption c	of abuse is	determin	ed by Form	122A-2.
Par	3: Sign Below								
	By signing here, I declare under penalty of perjury that the information	on on th	nis sta	ateme	ent and	d in any att	achments	is true and	correct.
	X /s/ Rosecarol Nina Lundy								
	Rosecarol Nina Lundy Signature of Debtor 1								
1	Date November 26, 2019								

**Rosecarol Nina Lundy** 

Debtor 1

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Debtor 1	Rosecarol Nina Lundy	Case number (if known)	
	MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

# **Current Monthly Income Details for the Debtor**

## **Debtor Income Details:**

Income for the Period 05/01/2019 to 10/31/2019.

### Line 9 - Pension and retirement income

Source of Income: **City of Ocala**Constant income of **\$100.54** per month.

## Line 9 - Pension and retirement income

Source of Income: **State Farm Annuity** Constant income of **\$550.86** per month.

#### Line 10 - Income from all other sources

Source of Income: Oxford Life Insurance

Income by Month:

6 Months Ago:	05/2019	\$0.00
5 Months Ago:	06/2019	\$0.00
4 Months Ago:	07/2019	\$0.00
3 Months Ago:	08/2019	\$0.00
2 Months Ago:	09/2019	\$0.00
Last Month:	10/2019	\$20,137.03
	Average per month:	\$3,356.17

### Non-CMI - VA Income

Source of Income: VA Death Benefits

Income by Month:

6 Months Ago:	05/2019	\$0.00
5 Months Ago:	06/2019	\$0.00
4 Months Ago:	07/2019	\$0.00
3 Months Ago:	08/2019	\$3,227.58
2 Months Ago:	09/2019	\$1,599.13
Last Month:	10/2019	\$1,599.13
	Average per month:	\$1,070.97

# Non-CMI - Social Security Act Income

Source of Income: **Social Security** Constant income of **\$1,334.50** per month.

#### Non-CMI - Excluded Other Income

Source of Income: Workers Compensation Annuity

Constant income of \$612.98 per month.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

# This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

# **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

# **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

# Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form

s.html#procedure.

## Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

# Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# United States Bankruptcy Court Middle District of Florida

In re	Rosecarol Nina Lundy	Case No.							
		Debtor(s)	Chapter	7					
VERIFICATION OF CREDITOR MATRIX									
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.									
Date:	November 26, 2019	/s/ Rosecarol Nina Lundy							
		Rosecarol Nina Lundy							

Signature of Debtor

Rosecarol Nina Lundy 10160 SE 69th Ave Belleview, FL 34420

Citi/Sears Citibank/Centralized Bankruptcy Po Box 790034

St Louis, MO 63179

Mr. Cooper Attn: Bankruptcy 8950 Cypress Waters Blvd Coppell, TX 75019

Kenneth M. Hesser Schatt, Hesser, McGraw PO Box 4440 Ocala, FL 34478

Citibank Citicorp/Attn: Centralized Bankruptcy Po Box 6241

Sioux Falls, SD 57117

Mr. Cooper Attn: Bankruptcy Po Box 619098 Dallas, TX 75261

American Financial R 1235 N Dutton Ave Santa Rosa, CA 95401 Citibank/Best Buy Attn: Bankruptcy Po Box 790441 St. Louis, MO 63179 Nation Star/Mr. Cooper Attn: Bankruptcy 8950 Cypress Waters Blvd

Coppell, TX 75019

Bank of America 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634

Comenity Bank Attn: Bankruptcy Po Box 182125 Columbus, OH 43218 North American Savings 12498 S 71 Hwy Grandview, MO 64030

Bank Of America Attn: Bankruptcy Po Box 982238 El Paso, TX 79998 Comenity Bank/King Size Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

State Farm Bank Attn: Bankrupcty Po Box 3298 Milwaukee, WI 53201

Suntrust Bank

Bb&t Credit Card Disputes Wilson, NC 27894

Comenity Bank/King Sizes Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Attn: Bankruptcy Mail Code VA-RVW-6290 PO Box 85 Richmond, VA 23286

BB&T Attn: Bankruptcy Po Box 1847 Wilson, NC 27894 Comenity Capital Bank/HSN Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Syncb/Jewerly TV Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Deptartment Store National Bank/Macy's Synchrony Bank Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040

Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Chase Auto Finance Attn: Bankruptcy Po Box 901076 Fort Worth, TX 76101

Ditech Attn: Bankruptcy Po Box 6172 Rapid City, SD 57709

Synchrony Bank Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/QVC Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Sams Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Shop NBC Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/ShopNBC Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Target Attn: Bankruptcy Po Box 9475 Minneapolis, MN 55440

Time Investment Company, Inc. Attn: Bankruptcy 100 North 6th Avenue West Bend, WI 53095

Us Bank Home Mortgage Attn: Bankruptcy 800 Nicollet Mall Minneapolis, MN 55402 Wells Fargo Dealer Services Attn: Bankruptcy Po Box 19657 Irvine, CA 92623

Wells Fargo Home Mor Attn: Written Correspondence/Bankruptcy Mac#2302-04e Pob 10335 Des Moines, IA 50306 B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Middle District of Florida

In	re Rosecarol Nina Lundy		Case No						
		Debtor(s)	Chapter	7					
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR D	EBTOR(S)					
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:								
	For legal services, I have agreed to accept		\$	1,850.00					
	Prior to the filing of this statement I have received		\$	1,850.00					
	Balance Due		\$	0.00					
2.	\$335.00 of the filing fee has been paid.								
3.	The source of the compensation paid to me was:								
	■ Debtor □ Other (specify):								
4.	The source of compensation to be paid to me is:								
	■ Debtor □ Other (specify):								
5. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associate									
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.									
6.	n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:								
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;</li> <li>e. [Other provisions as needed]</li> </ul>								
7.	7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:								
		CERTIFICATION							
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding.									
	November 26, 2019	/s/ Kenneth M. H	lesser						
-	Date	Kenneth M. Hes							
		Signature of Attorn Schatt, Hesser, I	•						
		PO Box 4440	oo.a						
		Ocala, FL 34478							
		352-789-6520 Factorial States	ax: 352-789-6570						
		Name of law firm	iie33Ci iCUIII						